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CONFIRMATION NO. 6252

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.	
10/716,577	11/18/2003	514	1618	13640-00020-US	
RULE					
APPLICANTS Karen Giroux, Piscataway, NJ;					
** CONTINUING DATA ***** This appln claims benefit of 60/427,476 11/18/2002 and is a CIP of 10/273,244 10/17/2002 ABN which is a CON of 09/627,215 07/27/2000 PAT 6,486,214 which is a CIP of 09/422,294 10/21/1999 PAT 6,468,519 which is a CIP of PCT/US98/18816 09/10/1998 which claims benefit of 60/058,328 09/10/1997 This application 10/716,577 11/18/2003 is a CIP of 09/917,194 07/27/2001 PAT 6,689,350 which claims benefit of 60/261,337 01/12/2001 and claims benefit of 60/220,707 07/27/2000					
** FOREIGN APPLICATIONS *****					
** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** 06/29/2004					
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /BLESSING M FUBARA/ Acknowledged <u>Examiner's signature</u>	<input type="checkbox"/> Met after Allowance <u>Initials</u>	STATE OR COUNTRY NJ	SHEETS DRAWINGS 39	TOTAL CLAIMS 79	INDEPENDENT CLAIMS 5
ADDRESS CONNOLLY BOVE LODGE & HUTZ, LLP P O BOX 2207 WILMINGTON, DE 19899 UNITED STATES					
TITLE Medical devices employing novel polymers					
FILING FEE RECEIVED 2134	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:			<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	